

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	10/21/01
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	913	11/14/01
FORMALITY REVIEW	H.T.	947	03/25/02
RESPONSE FORMALITY REVIEW	T2		

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

BEST AVAILABLE COPY

Claim	Final	Original	Date
1	✓	✓	6-25-02
2	✓	✓	10-18-02
3	✓	✓	4-11-03
4	✓	✓	8-27-03
5	✓	✓	2-13-04
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
11	✓	✓	
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If more than 150 claims or 10 actions
 staple additional sheet here

(LEFT INSIDE)

86SP-7C 573
 03/23/02
 829 1/14